	PATEN'	Tappi icat	ION SES	D-PART I IMM 1) (Column 2) FRATE FEE RATE FEE BASIC FEE 385.00 OR SMALL ENTITY TYPE OR SMALL ENTITY RATE FEE BASIC FEE 385.00 OR SMALL ENTITY RATE FEE BASIC FEE 385.00 OR SMALL ENTITY AUTHORITY RATE FEE BASIC FEE 385.00 OR SMALL ENTITY AUTHORITY TOTAL 466 OR TOTAL OTHER THAN SMALL ENTITY OR SMALL ENTITY PREVIOUSLY PRESENT PREVIOUSLY PAID FOR ADDIT FEE ADDIT FEE ADDIT FEE ADDIT FEE CCCIUMN 2) (COLUMN 3) MIGHEST NUMBER PREVIOUSLY PREVI										
Effective October 1, 2003														
	•	CLAIMS	AS FILE	D - PART	ı			SMALI	SMALL ENTITY TYPE OR SMALL ENTITY RATE FEE RASIC FEE 385.00 OR BASIC FEE 770.00 XS 94 GOR XS182 X432 OR X862 +1452 OR +2902 TOTAL 466 OR TOTAL SMALL ENTITY OR SMALL ENTITY RATE TIONAL FEE OR X862 1452 OR ADDIT FEE SATE TIONAL FEE OR X862					
r	TOTAL CLAIM	is .	Colu	(Column 1) (Column 2)							_ OF			
79				•			1	RATI	<u> </u>	FEE] .	RATE	FEE	
⊩	FOR			NUMBER FILED		NUMBER EXTRA		BASIC F		385.00	OR	BASIC FI	E 770.00	
F	TOTAL CHARGE	EABLE CLAIMS	29	minus 20=	9			X\$ 9-		41	OR	XS18=		
INDEPENDENT CLAIMS			13	minus 3 =		P		X43=			OR	X86=	1	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=			1			
* If the difference in column 1 is less than zero, enter "0" in column 2							ı		4	1/6	1		 	
Sold CLAIMS AS AMENDED - PART II								IOIA		166	JOH			
	14/48	(Column 1)		(Column 2) (Column 3)				SMALI	L EN	TITY	OR			
AMENDMENT A	1'	CLAIMS REMAINING		NUMB	A P	PRESENT	Γ				1		ADDI-	
		AFTER AMENDMENT				EXTRA	L	RATE		-		RATE		
	Total	1.00	Minus	- 6	29	•		X\$ 9=	Г	•	OR	X\$18=		
H	Independent	1.0	Minus		<u>3 </u>			X43=				X86≈		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								†-		OH.		 	
12,18,56							L		╄		L			
		(Cationa et				_	A				OR A			
	/ CLAIMS NIGHEST										_			
AMENDMENT B	10/1/1/	REMAINING AFTER AMENDMENT		PREVIOUS PAID FO	SLY EXT			RATE			ı	RATE		
	Total					/	L		_		-			
Ē	Independent	· 23	Minus	- 0	7	 X 	L	X\$ 9=		Δ	OR	X\$18=		
¥		NTATION OF MI		PENDENT C	AIM			X43= ·	\/		OR	X86≖		
						<u> </u>	Г	145=	Λ	7,		+290=		
						•	L		\rightarrow	₩.	L	TOTAL		
		(Column 1)	-	(Column	2)	(Column 3)	ADI	OIT. FEE	<u> </u>	7,	JN A	DOT, FEE		
ر	•	CLAIMS		HIGHES	7		Ė	-	45		_			
		REMAINING AFTER		-NUMBER PREVIOUS	LY	PRESENT EXTRA	F	ME	ADI TION			RATE	ADDI- TIONAL	
AMCNUMENT	Total	AMENDMENT`	Minus	PAID FOR			\vdash		<u>FE</u>	E ·	L		FEE	
	ndependent		Minus	-	-+		L	\$ 9=		o	A ?	X\$18=		
1	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						×	43=		70	R	X86=		
OR OR										200				
If the entry in column 1 is less than the entry in column 2, write '0' in column 3. If the "Highest Number Provinces Paul For IN THIS SPACE is two than 3.														
6	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE													
• • •	e rugnesi Numb	er Previously Paid	For (Total or	independent) i	s the h	ighest number to	ound is	the appr	oprist	e bax in	cotum	n 1.	- 1	